

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	G D	871	03/12/01
O.I.P.E. CLASSIFIER	- T N	1	3/3/2001
FORMALITY REVIEW	BZ	JC3-883	04-13-01
RESPONSE FORMALITY REVIEW	TZ	941	01/19/01

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      0 ..... Objected

Claim	Date
Final	
Original	b7 10 4/1 b7 02 03 b7 03 b7 03 b7 03
1	✓ =
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50	✓ =

Claim	Date
Final	
Original	b7 10 4/1 b7 02 03 b7 03 b7 03
51	✓ N
52	✓ N
53	✓ N
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60	✓ N
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80	✓
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97	0
98	✓ =
99	
100	✓

Claim	Date
Final	
Original	
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If more than 150 claims or 10 actions  
staple additional sheet here

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